



DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS

DECK ATTACHMENT AFFIDAVIT OF COMPLIANCE

Building Permit Serial Number: _____

To: The Building Official of Howard County, Maryland

I, _____, the undersigned, am the owner, builder, deck contractor, or owner's agent of
the dwelling located at : _____

I understand and accept the responsibility for compliance with the Howard County *Deck Attachment Guide* procedure related to the construction and attachment of decks to existing dwellings.

FOR ALL NEW DECK CONSTRUCTION ONE OF THE FOLLOWING MUST BE CHECKED:

- YES _____ The dwelling has a conventional, solid sawn 2x__ lumber floor framing system (including rim joist). The new or replacement deck will be attached directly to this conventional 2x__ lumber rim joist. By checking this response, I understand that the deck may be attached using any of the deck attachment methods indicated on the Howard County Deck Attachment Guide) and agree to use one of these methods.
- NO _____ The dwelling does not have a conventional, solid sawn 2x__ lumber floor framing system (including rim joist). By checking this response, I understand that only deck attachment method #2 (ledger supported by additional structural support, lagged into house foundation wall) or #3 (independent beam & column system) may be used, as indicated on the Howard County Deck Attachment Guide, and I agree to use one of these two methods.
- NO _____ I do not know whether the dwelling has a conventional, solid sawn 2x__ lumber floor framing system (including rim joist). By checking this response, I understand that only deck attachment method #2 (ledger supported by additional structural support, lagged into house foundation wall) or #3 (independent beam & column system) may be used, as indicated on the Howard County Deck Attachment Guide, and I agree to use one of these two methods.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the contents of the foregoing paper are true.

Signature _____
(Owner; Owner's Agent; Builder; Deck Contractor)

Date _____

Print Name _____

Address: _____

White: Department

Yellow: Inspector

Pink: Owner

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